

Authorization to Incur Expenses

PD101 REV.11/12

DATE: _____

NAME OF ACCUSED: _____

☐ JD ☐ GA ☐ JV ☐ CP _____

DOCKET NO.: _____

CHARGES: _____

(UNDERLYING CHARGES): _____

I I HEREBY REQUEST AUTHORIZATION TO INCUR EXPENSE FOR THE FOLLOWING:

I BELIEVE THIS SERVICE IS NECESSARY FOR THE FOLLOWING REASON(S):

1. _____

2. I have contacted (name of service provider): _____
 a) His/her hourly rate will be: _____
 b) The anticipated total (additional) cost for the service will be: _____
 c) This is a supplemental request and the prior authorization (s) was for: _____

II CHECK ONE AND COMPLETE:

- ☐ There may be future costs for services from this same source (e.g. testifying at trial, etc.)
- ☐ There will probably not be any further costs from this same source as a result of this service.

III CHECK ONE AND COMPLETE:

- ☐ The accused will pay _____ toward the cost of this service.
- ☐ The accused is unable to pay or obtain assistance in the payment of costs to be incurred or any portion thereof.

 Approved by
 Public Defender / Supervising Asst. Public Defender

 Telephone #: _____

Email: _____

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 AUTHORIZATION IS GRANTED, IN ACCORDANCE WITH THE ABOVE REQUEST.

SPECIAL CONDITIONS AND COMMENTS:

 DATE

 CHIEF / DEPUTY CHIEF PUBLIC DEFENDER
 Director of Assigned Counsel

ADDENDUM TO AUTHORIZATION TO INCUR EXPENSES

Summary of the Case

Description of Expert

What experts will be doing to assist in defense

Necessity